



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

First-Named Inventor or Lee E. Goldstein
Application Identifier:

For: OCULAR DIAGNOSIS OF ALZHEIMER'S DISEASE

November 18, 2003
Boston, Massachusetts

Mail Stop Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

**REQUEST FOR FILING A CONTINUATION-IN PART UTILITY
APPLICATION UNDER 37 C.F.R. §1.53(b)**

1. This application claims priority to U.S. provisional application 60/427,153, filed November 18, 2002 and to U.S. provisional application 60/452,336, filed March 5, 2003; is a continuation in part of USSN 10/132,779, filed on April 25, 2002, which claims priority to U.S. provisional application 60/287,124, filed April 27, 2001; and is a continuation in part of USSN 09/935,126, filed on August 21, 2001, which claims priority to U.S. provisional application 60/226,590, filed on August 21, 2000; the entire contents of which are hereby incorporated by reference.

2. ☒ Total Pages: 40
 Specification (33 pages); Claims (6 pages); Abstract (1 page)
 Drawings: 6 sheets, Figs. 1-6 - Informal

3. ☒ Declaration and Power of Attorney
 ☒ Unsigned (2 pages)
 ☐ Signed

✓
FIRST-NAMED INVENTOR OR
APPLICATION IDENTIFIER: **Lee E Goldstein**
Request for New Nonprovisional Application (37 C.F.R. §1.53(b))

4. Fee Calculation

CLAIMS AS FILED					
Claims	Number Filed	Basic Fee Allowance	Number Extra	Rate	Basic Fee 37 C.F.R. 1.16(a) \$770.00
Total Claims (37 C.F.R. 1.16(c))	49	- 20 =	29	\$18.00	\$522.00
Independent Claims (37 C.F.R. 1.16(b))	6	- 3 =	3	\$86.00	\$258.00
Multiple Dependent Claim(s), if any (37 C.F.R. 1.16(d))				\$290.00	
				SUBTOTAL:	\$1,550.00
				Reduction by 50% for filing by <u>small entity</u> :	\$775.00
				TOTAL FEE:	\$1,485.00

5. ☒ A check in the amount of **\$775.00** is enclosed.
6. ☒ The Commissioner is hereby authorized to credit overpayments or charge all fees to Deposit Account No. 50-0311, Ref. No. 27374-006 CIP.
7. ☒ Return Receipt Postcard Enclosed.

Respectfully submitted,



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